

6. Team working

6.1. Ability to contribute to team working

Ability to draw on knowledge that a well-functioning team:

can maintain a capacity to be self-reflective in the face of the challenges of the work

can maintain a focus on the various tasks associated with the work

will not be drawn into unhelpful behaviours or attitudes that could adversely impact service users

can respond constructively to negative feedback from service users and other parts of the statutory system (e.g. other agencies, referrers or commissioners)

can raise concerns about poor or harmful practice clearly, confidently and responsively

works to mitigate the impact of discrimination and systemic inequalities

comprises team members who work to support their own and each other's wellbeing (and therefore capacity to help) by setting limits, holding boundaries and fostering compassion to self and others

An ability to sustain a therapeutic culture by ensuring that there is:

clarity over the team's organisational structure

clarity over (and agreement on) the leadership of the team

clarity over roles and role diversity

a capacity for mutual communication that is open, respectful and reflective

mutual valuing of team members

An ability to recognise signs that team working is becoming dysfunctional, e.g. teams that:

maintain consistency by applying the same inflexible procedures to all, and being unable to adapt them to individual need

have difficulty working together and arriving at a coherent formulation focused on the patient, rather than on what can be offered by each professional/viewpoint (and

so the professional organisation taking priority over the patient)
become preoccupied with internal team conflicts that they are unwilling to acknowledge and resolve
fail to implement a coherent team-based plan, with the result that individual members or subgroups of the team work independently of each other
avoid coming together to arrive at coherent plans because this reduces the likelihood of exposing team conflict
denigrate the input/efficacy of other agencies/systems and become an embattled and isolated unit (in tandem with an uncritical and idealised view of their own success)
become divided within themselves (e.g. different members of the team 'taking sides' with patients, or becoming preoccupied with advancing their own ideas)
become focused on professional hierarchies, with separate agendas and chains of management

An ability to reflect (individually and as part of a team) on the functioning of the team as a whole, and individual practice within it

An ability to reflect on challenges to team communication and functioning (usually through discussion with a supervisor or peer) to consider how these can be best managed, e.g. by:

identifying when (and when not) to challenge problematic team behaviours
presenting a case calmly and objectively
focusing on the challenges (rather than on personal issues)
focusing on the present and future rather than the past
listening to the point of view of other team members
contributing to problem solving (identifying potential strategies for resolving the issues)

An ability to actively contribute to meetings on planning, coordinating, maintaining and evaluating a patient's care or care plan

An ability to value the contribution of others but also to assert differences of view and to resolve issues or concerns through open dialogue

6.2. Leadership

Note about the competences in this sub-domain

Different types of problems require different types of leadership and no single leadership style is effective for all.

Nonetheless, this section identifies the competences associated with compassionate leadership, because these are likely to sustain stronger connections between people, improve collaboration, raise levels of trust and enhance loyalty.

Qualities associated with leadership can be displayed by all members of a team, not just those in formal management roles.

An ability to draw on knowledge that effective leaders articulate and represent the values and aims of a unit and the culture required to achieve these

An ability to draw on knowledge that effective leaders build trust with colleagues by:

demonstrating that they understand and value their motivations

encourage participation in decision-making

encouraging them to express their ideas and opinions, and showing respect for these

explicitly acknowledge and give credit to staff contributions

listen to their concerns and interests and responding by acting on them

An ability to draw on knowledge that effective leaders:

help colleagues to understand their roles and how they can contribute to the unit's overall success

instil colleagues with a sense of value and purpose and foster their engagement with the aims of the unit

develop a shared understanding with the team, embracing their ideas in the context of the needs of the population served by the service

encourage innovation (but can challenge ideas and behaviours respectfully if they are contrary to accepted professional practice/ the evidence base)

encourage an appropriately self-critical stance among colleagues (being open to

evaluating the efficacy and functioning of the unit and identifying ways in which it can be improved)

are committed to open communication and the identification and resolution of team conflicts where they arise

An ability to draw on knowledge that effective leaders contribute to an ethical and supportive environment that helps colleagues feel safe in their work (e.g. knowing that they will advocate for them and treat them fairly)

An ability to draw on knowledge that effective leaders:

are able to take and implement decisions (but also revise them if there are compelling reasons to do so)

take responsibility for their decisions, and identify and learn from their mistakes

demonstrate resilience when there are setbacks and maintaining the ability to show others the way forward

help colleagues cope with organisational change and address issues promptly, so that problems do not become entrenched or escalate

6.3. Audit and quality monitoring

An ability to draw on knowledge that the aim of audit is to improve the quality of services	
An ability to draw on knowledge of the risk that audit and quality monitoring and improvement are seen by teams as a managerial activity (organised on a 'top-down' basis), reducing a sense of ownership (and potentially, participation), and:	
an ability to increase the salience and relevance of audit for frontline staff and patients, e.g. by:	
sharing decisions about which areas to audit (along with as those based on indicators of quality that are based on national and local standards)	
inviting frontline staff and patients to indicate which aspects of services should be audited	
encouraging audit of areas that are seen as priorities by teams and patients	
encouraging service users and teams to lead on audits they see as a priority	
sharing data and outcomes from audit in an accessible form	
participating in developing and implementing quality improvement action plans based on data drawn from audit	

6.4. Teaching and training others and enhancing skills in the team

An ability for the PA to teach/train in areas:

for which they themselves have received appropriate training

in which they have the necessary knowledge, skills and experience

An ability to identify areas where additional training would enhance the capacity of the team to work effectively with patients, and to specify the training that would achieve this, and:

an ability to make use of audit/quality improvement processes to help evaluate training needs in a service, and to evaluate the impact of training that has been delivered

An ability to liaise with relevant team members to plan how training/teaching will be delivered, e.g.:

for which team members

whether it will be formal or informal teaching

whether it will be delivered to individuals or a group

An ability to draw on basic knowledge of principles associated with effective learning, e.g.:

setting clear learning objectives

identifying the knowledge and skills trainees already possess

identifying what trainees need to know and do in order to develop the new area of skill

identifying steps needed to bridge gaps between what trainees know before training, and what they should know and do afterwards e.g.

breaking down areas of knowledge and skills into manageable 'chunks'

checking that trainees have understood what is being conveyed

modelling (i.e. demonstrating what needs to be done)

observing skills in action and offering constructive, structured feedback

An ability to break down complex or complicated concepts/skills into simpler units, and to link these into a coherent framework, with the aim of ensuring that teaching always stays within the trainee's zone of understanding/ability

An ability to help trainees make links between areas of knowledge and the ways these are linked to skills

An ability to check trainees' understanding at regular intervals and to adjust pace and content in response to feedback

An ability to give constructive and specific feedback when trainees practise skills

An ability to ensure that teaching/training is conducted in a collaborative and supportive manner that enables trainees to give feedback and so shape their learning (e.g. encouraging them to say what they do not understand, or areas that they need to focus more time on)

An ability for the PA to identify if issues arise that take them beyond their area of expertise, to be open with trainees if this is the case, and so to place limits on their teaching

An ability for the PA to evaluate the success of their teaching/training by asking for feedback, and to use this feedback to improve their teaching